

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/802,323
		Filing Date	March 16, 2004
		First Named Inventor	Diacakis et al.
		Art Unit	2681
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	3	Attorney Docket Number	022395-123510US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Revocation of Power of Attorney with Copy of New Power of Attorney and Change of Correspondence Address Statement Under 37 CFR 3.73b
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP
Signature	Melvin D. Chan Reg. No. 39,626
Date	November 19, 2004

## CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on November 19, 2004

Typed or printed name	Robert L. Jackson
Signature	Robert L. Jackson
Date	November 19, 2004

60361348 v1

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/802,323
	Filing Date	March 16, 2004
	First Named Inventor	Diacakis et al.
	Art Unit	2681
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	022395-123510US

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

46670

☐ Please change the correspondence address for the above-identified application to:



The address associated with  
Customer Number:

46670

OR

☐ Firm or  
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name

Alan D. Minsk

Signature

*Alan D. Minsk*

Date

11/15/2004

Telephone

(650) 480-4211

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



Total of \_\_\_\_\_ forms are submitted.



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66431

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/082,323	02/26/2002	Michael J. Walsh	92815pus	3462
6431	7590	08/25/2004	EXAMINER	
HOFBAUER ASSOCIATES SUITE 205 NORTH 1455 LAKESHORE ROAD BURLINGTON, ON L7S 2J1 CANADA			HWANG, VICTOR KENNY	
			ART UNIT	PAPER NUMBER
			3764	

DATE MAILED: 08/25/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

**TOWNSEND  
and  
TOWNSEND  
and  
CREW**  
I.L.P.

San Francisco, California  
Tel 415 576-0200

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### FACSIMILE COVER SHEET

Date: <b>January 27, 2005</b>	Client & Matter Number: <b>022395-440522US</b>	No. Pages (including this one): <b>6</b>
To: <b>Ms. Burnell Ross U.S. Patent Office - Art Unit 3700</b>	At Fax Number: <b>(571) 273-4389</b>	Confirmation Phone Number: <b>(571) 272-4389</b>
From: Robert L. Jackson		(2706)

#### Message:

Enclosed are the Revocation of Power of Attorney, Statement Under 37 CFR 3.73b and Transmittal forms as signed with the serial number as 10,802,323. I have also attached the Notice of Acceptance of Power of Attorney for the incorrect serial number of 10/082,323. Please let me know how I can assist in processing the correct Power of Attorney documents.

Original Will:	<input type="checkbox"/> BE SENT BY MAIL	<input type="checkbox"/> BE SENT BY FEDEX/OVERNIGHT COURIER	<input type="checkbox"/> BE SENT BY MESSENGER	<input checked="" type="checkbox"/> NOT BE SENT
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Faxed: Return to: Robert L. Jackson - (5463)

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#### Important

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60408017 v1



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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
10/182,323	02/26/2002	Michael J. Walsh	92815pus

46670  
TOWNSEND AND TOWNSEND AND CREW/22395  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 3462

\*OC000000014790822\*

\*OC000000014790822\*

Date Mailed: 12/17/2004

## NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 09/27/2004.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

BURNELL L. ROSS  
3700 (571) 272-4389

OFFICE COPY

650 480-4211

PTO/SB/98 (08-03)

Attorney Docket No. 022395-123510US

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Disackis et al.Application No./Patent No.: 10/802,323Filed/Issue Date: March 16, 2004Entitled: Lawful Intercept ServiceOpenwave Systems Inc., a Delaware corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015101, Frame 0768, or for which a copy thereof is attached.

OR:

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

11/15/2004  
Date

(650) 480-4211  
Telephone number

Alan D. Minsk  
Typed or printed name

Alan D. Minsk  
Signature

Director and Patent Counsel  
Title

60295991 v1